

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>8/31/04</u>		2 Serial/Patent # <u>10/665,943</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
	Filing			\$							
	Amendment			\$							
	Extension of Time			\$							
	Notice of Appeal/Appeal			\$							
<input checked="" type="checkbox"/>	Petition		7/26/04	\$ 130							
	Issue			\$							
	Cert of Correction/Terminal Disc.			\$							
	Maintenance			\$							
	Assignment			\$							
	Other			\$							
			7 TOTAL AMOUNT OF REFUND	\$ 130							
10 REASON:		8 TO BE REFUNDED BY:									
	Overpayment	<input checked="" type="checkbox"/> Treasury Check									
	Duplicate Payment	<input checked="" type="checkbox"/> Credit Deposit A/C #:									
<input checked="" type="checkbox"/>	No Fee Due (Explanation):	9 <table border="1" style="display: inline-table; text-align: center; width: 150px;"> <tr> <td style="width: 20px;">1</td> <td style="width: 20px;">0</td> <td style="width: 20px;">--</td> <td style="width: 20px;">0</td> <td style="width: 20px;">4</td> <td style="width: 20px;">4</td> <td style="width: 20px;">7</td> </tr> </table>			1	0	--	0	4	4	7
1	0	--	0	4	4	7					
<i>Petition granted.</i>											
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>CHARCENA GRANT</u> TITLE: <u>owner</u> SIGNATURE: <u><i>Charcena Grant</i></u> PHONE: <u>306-0221</u> OFFICE: <u><i>Quon</i></u>											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****											
APPROVED: <u><i>[Signature]</i></u> DATE: <u>9-8-04</u>											

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

**Office of Finance
Refund Branch
Crystal Park One, Room 802B**